

Department of Energy Washington, D.C. 20545

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JUN 2.6 1980

Mr. Wallace O. Green
Acting Deputy Assistant Secretary
Territorial and International Affairs
--U.S. Department of the Interior
Washington, D.C. 20240

Dear Mr. Green:

As requested in your letter of May 20, 1980, to Mrs. Ruth C. Clusen, and per Mr. Copaken's verbal request following a meeting of April 23, 1980, at his office attended by Mr. Copaken and several of his consultants, the Department of Energy (DOE), Brookhaven National Laboratory (BNL), and the Department of Interior, which was represented by Mr. John DeYoung, the Department of Energy is pleased to elaborate upon its proposed agreement as appended to my letter of March 25, 1980, to Mrs. Ruth Van Cleve.

It was clear during this meeting that Mr. Copaken, perhaps, did not fully understand the substance of our offer of March 25, 1980, or the reasons behind it. Discussions on April 23, 1980, between our medical personnel (Department of Energy and Brookhaven National Laboratory) and Mr. Copaken's medical consultant, Dr. Robert G. Loeffler, were most helpful in clarifying many of these issues, however. It presumably is a consequence of these discussions that Mr. Copaken verbally requested us to amplify upon our offer of March 25, 1980.

This amplification basically consists of a detailed identification of the laboratory tests to be included under the general term "biochemical screening profile" which was included in paragraph 1 of the proposed agreement appended to my letter of March 25, 1980. The identification of specific tests included under that term is appended to this letter. You will note that it includes hematological, biochemical and urological analyses, plus other indicators, which would clearly identify, among other things, any evidence of thyroid dysfunction or of blood dyscrasias.

Clearly, any possible radiation exposure of the people of Likiep Atoll has been considerably less than that experienced by the people of Rongelap and Utirik, and, at this time, after 26 years of medical follow-up, we have no reason to believe that diseases which have not appeared among the Rongelap and Utirik populations would appear among any other populations in the Marshall Islands as a consequence of any possible lower levels of radiation exposure (e.g., bone cancer or opthalmic effects).

Except for the enclosed clarification of the first paragraph as indicated, the proposed agreement included in my letter to Mrs. Van Cleve of March 25, 1980, remains walid.

We hope that this will clarify our previous proposal and will be responsive to your request and that of Mr. Copaken.

Sincerely,

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Bruce W. Wachholz, Ph.D. Office of Health and Environmental Research, Office of Environment

## Enclosure

bcc: OHER Reading File

Wachholz's Reading File
L. Brothers, DASEV/P, EV-2

CONCURRENCES RTEL SYMBOL BWachholz BATTALS/SIQ. DATE 6/ /80 RTQ. SYMBOL TMcCraw BETIALS/SIG. DATE 6/ /80 RTQ. SYMBOL JViren BETTALS/SIQ. DATE 6/ /80 ATCL SYMBOL JBlair INITIALS/SIG. DATE 6/ /80 ATCL SYMBOL WWBurr -MITIALS/SIG. DATE 6/ /80 RTG. SYMBOL HHollister MITIALS/SIQ. DATE 6/ /80 RTG. SYMBOL RCClusen INITIALS/SIG. DATE 6/ /80 RTG. SYMBOL

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## STUDIES TO BE INCLUDED PER THE PROPOSED AGREEMENT OF MARCH 25, 1980

- I. Medical History
- II. Clinical Studies
- III. Laboratory Tests
  - A. Hematological Analyses
    - 1. White Blood Cell
    - 2. Red Blood Cell
    - 3. Hematocrit
    - 4. Hemoglobin
    - 5. Platelet
    - 6. Differential Count
    - 7. Computation of Cell Indices
    - 8. Cellular Morphology
  - B. Biochemical Analyses
    - 1. T<sub>4</sub>
    - 2. TSH

As indicated to follow thyroid carcinoma

- 3. HTG
- 4. SMA-20, including
  - a. Sugar
  - b. Electrolytes
  - c. Lipids
  - d. Serum protein
  - e. Uric acid
  - f. Blood urea nitrogen

- g. Creatinine
- h. LDH
- i. CPK
- j. And such other tests as may be indicated by disease patterns (e.g., alkaline phosphatase, cholesterol, etc.)
- C. Urinalysis, Including Routine Microscopic Analysis

## IV. Other

Where confirmatory evidence is indicated (e.g., gamma camera imaging, biopsies), such tests would be recommended on a case-by-case basis.

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